

EMPLOYER'S QUARTERLY WAGE LIST

UTAH DEPARTMENT OF WORKFORCE SERVICES

140 East 300 South, P.O. Box 45233, Salt Lake City, Utah 84145-0233

1-801-526-9400; 1-800-222-2857 EXT. 9400

READ REVERSE BEFORE
COMPLETING THIS REPORT

You may submit this report on-line at our website: <http://jobs.utah.gov/ui>

EMPLOYER NAME:

EMPLOYERS UTAH
REGISTRATION NUMBER

If your report is HAND PRINTED, please use UPPER CASE only and in a block style similar to this sample. USE BLACK INK PEN ONLY, Thank you.

QUARTER ENDING DATE

ENTER GRAND TOTALS ON PAGE 1 ONLY

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
S	T	U	V	W	X	Y	Z	0	1	2	3	4	5	6	7	8	9

Total Wages from line 3
of Contribution Report

NOTE: These two
Totals should agree

Total Wages reported on
Wage Lists (all pages)

SOCIAL SECURITY
ACCOUNT NUMBER

EMPLOYEE NAME

First Initial Middle Initial Last Name

TOTAL WAGES PAID EACH
EMPLOYEE IN THIS QUARTER

TOTAL OF THIS PAGE ONLY